

pranolol and phentolamine. This effect is avoided by tapering the drug over two to four days. Onset of action is within two to four hours and serum half-life is 20 hours. Twice-a-day dosage is recommended. Administration is begun at 0.1 mg twice daily and increased until control is achieved or limiting side effects occur, up to a maximum of 2.4 mg daily. Clonidine should not be administered to unreliable patients, and patients receiving it should carry an extra supply and Medic Alert® or some other identification tag.

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 Baer L, Brunner HR, Bard R, et al: Suppression of renin and aldosterone by clonidine. *Ann Intern Med* 74:830, 1971
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Talwin Myopathy

TALWIN (Pentazocine®) is a widely used analgesic. It has gained popularity because it was considered to be less addictive than other potent analgesics.

By 1971 at least two articles had appeared in the dermatology literature describing local reactions to Pentazocine injections. More recently, a much more profound and disabling reaction in the muscles termed "fibrous myopathy" was reported from several sources.

Two young men in their 30's were recently admitted, at the same time, to the chronic pain unit at Rancho Los Amigos Hospital. Both were suffering from fibrous myopathy of the deltoid area bilaterally, and this called the author's attention to this entity. Both young men had (A-B) abduction deformities and complained bitterly of their inability to cross the arm in front of them to carry out such functions as washing the opposite axillary fossa. One of the young men reported that his mother had undergone a surgical excision of both deltoid muscles to relieve this deformity which had followed use of Pentazocine over a period of time.

Steiner and co-workers reported a case with generalized abduction deformity of both upper extremities and lower extremities in a 42-year-old man who had persistent myalgia and progressive muscle stiffness. In this man the disability and rigidity progressed even though the injections had

been terminated six months before he came under their care.

There are no specific enzyme or laboratory findings in this condition. The skin overlying the muscles may be atrophied and scarred to the fibrous degenerative muscles. Findings on electromyograms may show a mixed pattern or an interference pattern while at full effort. There is no muscle activity at rest as would be the case in other types of myopathy.

Temporary improvement has resulted in our patients by stretching and manipulating the tight upper extremities under general anesthesia. A brief course of prednisone is given at the time to minimize, it is hoped, re-scarring. Whether or not this treatment will give lasting benefit is very much in doubt. Avoidence of prolonged use of injectable Pentazocine seems the only rational approach to prevent this tragic disabling disorder.

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- Steiner JC, Windelman C, de Jesus PV, et al: Pentazocine-induced myopathy. *Arch Neurol* 28:408-409, Jun 1973
 Oh SJ, Rollins JL, Lewis I, et al: Pentazocine-induced fibrous myopathy. *JAMA* 231:271-273, Jan 20, 1975

Computers in Family Practice

THE ROLE OF COMPUTERS in medicine generally, and in family practice specifically, has been gathering increased interest in recent years but has remained unclear. An experience base is now developing which can start to answer some of the initial questions concerning its value in medical practice and education.

A group of three family physicians in Damariscotta, Maine, recently reported their experience over three years with direct computer-patient interactions both in military and private practice. In developing their computer program, this group applied four essential criteria: (1) relatively low cost, (2) extensive programing with medically compatible language, (3) terminal constellations which permit direct nonthreatening patient interaction and (4) no technological expertise required by office personnel. A computerized medical record was developed and selected administrative functions and other aids to patient care were incorporated into the computer program where needed and economically feasible. The computer was thereby used for patient histories, patient education, physician education